

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W. A		07/24/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	18	JC906	08/08/01
RESPONSE FORMALITY REVIEW	M. H	625	10-17-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	Original
1	12/7/01
2	12/7/01
3	12/7/01
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50	12/7/01

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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373/8/7 857 10/14/01